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The unfunded pension liability fringe rate costs place significant burden on research at UConn Health in several ways:

- 1) Reduced competitiveness of new grant applications. The scope of the research we can legitimately propose is severely limited by budgetary constraints. This negatively impacts UConn Health in a number of ways:
 - a. Simply not writing grants
 - b. "Farming out" data collection to collaborating institutions that have lower personnel costs. Consequently, indirect funds go to another institution.
 - c. Fewer grants funded because the scope we can propose is too limited.
- 2) Increased burden on investigators to fill in staffing gaps:
 - a. Reduced faculty productivity: I personally conduct 4 hour assessments on Saturday and Sundays, when typically I would be writing papers or new grant applications.
 - b. Extensive time needed to engage, build, and train volunteers and students to conduct assessments, instead of relying on full-time trained staff. This is not cost-effective and there are potentially serious impacts on quality control relative to having a team of trained full-time staff.
- 3) Even with this, my current NIMH-funded R01 is running more than \$100,000 in the hole and I see no way of filling that gap without impact on recruitment, sample size, and ultimately productivity.

Please support HB5115 which will remove the legacy cost burden from our research grants.